

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------|--------------|-----------------|
| FEE DETERMINATION | <i>Maile</i> | <i>JC 19</i> | <i>04-13-01</i> |
| O.I.P.E. CLASSIFIER | <i>AM</i> | <i>32</i> | <i>5/8</i> |
| FORMALITY REVIEW | <i>AM</i> | <i>917</i> | <i>05-24-01</i> |
| RESPONSE FORMALITY REVIEW | <i>AP</i> | <i>110</i> | <i>9-3-01</i> |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|----------------|
| Final Original | |
| 1 | <i>9/24/03</i> |
| 2 | <i>✓</i> |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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